## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

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	FILING DATE	

APPLICANT(S)

SERIAL NO.

CLAIMS

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CLAIMS	<u> </u>	(0.57)	201	<b>37 13</b>	<b></b>	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM **PTO-1360** (REV. 3-78)

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